# FOR YOUR INFORMATION

# MARYLAND PHARMACY LAWS AND REGULATIONS

To provide you with the legal information you need to practice in Maryland, the Lexis Law Publishing Company (Michie Company) publishes the Code of Maryland Regulations (COMAR), Title 10: The Department of Health and Mental Hygiene.

You may contact the Lexis Law Publishing for specific purchasing information at the address noted below:

Lexis Publishing 1275 Broadway Albany, NY 12204-2694

Phone Number: (800) 542-0957

E-Mail: Customer. Support@Bender.com

Http://bookstore.lexis.com/bookstore/store\_index

The Maryland Board of Pharmacy also has a limited number of the 2000 issue of the Maryland – Specific Pharmacy Laws and Regulations Books available for a fee of \$12.00. To order this publication send your check or money order and **form** to: (**You may link to the order form on the Board's website www.mdbop.org**).

Maryland Board of Pharmacy 4201 Patterson Ave. Baltimore, MD 21215 Attention: Ms. Joan Lawrence

It is still up to the applicant to be familiar with the Maryland Pharmacy Laws and Regulations that have passed since 2000.



# **4201 PATTERSON AVENUE**

**BALTIMORE, MARYLAND 21215** 

PHONE: 410-764-4755

**TOLL FREE: 1-800-542-4964 (IN MARYLAND ONLY)** 

FAX: 410-358-6207 or 410-358-9512

MARYLAND RELAY SERVICE: 1-800-735-2258

WEB SITE: mdbop.org

# PHARMACIST LICENSURE EXAMINATION

Information contained herein replaces and renders void information contained in previous licensure/examination information packets that you may have received.

# REQUIREMENTS FOR EXAMINATION

## **ELIGIBILITY:**

- Be at least 18 years of age, and of good moral character
- A graduate of a school or college of pharmacy that is either approved by the Board or accredited by the American Council on Pharmaceutical Education.
- Have completed a Professional Experience Program (PEP) as required by the Board.

## PROFESSIONAL EXPERIENCE PROGRAM - HOURS REQUIRED:

Applicants who have graduated from;

- the University of Maryland School of Pharmacy or Howard University and have successfully completed their PEP will have met the PEP requirements.
- pharmacy schools in New Jersey, New York, Pennsylvania, Virginia and West Virginia, with structured Professional Experience Programs (PEP), are required to have a total of 1,200 hours of experience.
- ❖ All other applicants must have completed a total of 1,560 hours in a PEP.
- The Board may accept a PEP conducted or supervised by a school or college of pharmacy.

Partial and/or non pharmacy school supervised programs or experience will be evaluated on an individual basis. In order to receive credit for experience outside of a structured school or college PEP, a notarized affidavit from each employer, stipulating the time served in hours per week, must be submitted with the application or have been previously filed with the Board.

### FOREIGN PHARMACY GRADUATES

Foreign pharmacy graduates shall pass the Foreign Pharmacy Graduate Equivalence Examination (FPGEE), which is administered by the National Association of Boards of Pharmacy (NABP), before submitting an application for licensure.

## Contact NABP @ (847) 698-6227 for details regarding the FPGEE.

The <u>original</u> FPGEE certificate must be submitted with the application for licensure (original will be returned to graduate). All practical experience must be earned in the United States under the supervision of a licensed pharmacist. Currently, there is no specific PEP in Maryland for graduates of foreign schools. Each individual must contact the pharmacy where he/she desires to gain this experience and arrange employment or volunteer work. Volunteer and/or work experience must total 1,560 hours. These hours are to be recorded on the Pharmacy Experience Affidavit (form attached).

## **APPLICATIONS GENERALLY:**

Please acquire the NAPLEX, the MPJE Registration Bulletin and the Maryland Application for Licensure as a Pharmacist. Read and follow all instructions carefully. A personal copy of the Candidate's Review Guide may be obtained through the National Association of Boards of Pharmacy (NABP), 700 Busse Highway, Park Ridge, IL. 60068, Phone No.: 1-847-698-6227. Once you have completed the NAPLEX registration form and the Maryland Application for Licensure as a Pharmacist (State Application), please return all registration forms to the Maryland Board of Pharmacy, 4201 Patterson Avenue, Baltimore, MD 21215. Once your application has been reviewed by the Board, you will be notified regarding eligibility to take the following required examinations.

## **NAPLEX**

The National Association of Pharmacy Licensure Examination (NAPLEX) is a computerized test given at various Sylvan Learning Centers located throughout the State. Candidates do not have to test in Maryland, but must list Maryland as the primary state of licensure.

**INSTRUCTIONS:** <u>Mail the NAPLEX form to the Maryland Board of Pharmacy for approval.</u>

The Board must approve the application before it is submitted to NABP.

PLEASE DO NOT SEND THE FEE TO THE BOARD -- FORWARD

TO NABP. Your application will be mailed to NABP once approved.

## MPJE

The Multi-State Pharmacy Jurisprudence Examination (MPJE) is a computerized test given at various Sylvan Learning Centers located throughout the United States. The MPJE test consists of Federal and State laws specific to the state where candidates are seeking licensure. A copy of the Maryland Pharmacy Laws and Regulations may be obtained from the Maryland Pharmacists Association (MPhA), Phone No.: 410-727-0746 or Lexis Publishing 800-542-0957. Forms are attached.

INSTRUCTIONS: Mail the MPJE form to the Maryland Board of Pharmacy for approval.

The Board must approve the application before it is submitted to NABP.

PLEASE DO NOT SEND THE FEE TO THE BOARD -- FORWARD TO NABP. Your application will be mailed to NABP once approved.

## LABORATORY TEST

The Laboratory Test requires applicants to complete four (4) prescriptions in a two hour and 10 minute time period. Grades are based on product content, appearance, labeling, written questions, written procedure, and calculations. The lab exam is given in January, June and October and is held at the School of Pharmacy - Pharmacy Learning Center located at 110 N. Pine Street, Baltimore, MD 21201.

INSTRUCTIONS: Mail the Laboratory application, required attachments and fee to the

Maryland Board of Pharmacy. You will be notified in a timely

manner of the lab schedule.

# **TEST OF ORAL ENGLISH COMPETENCY**

An applicant must pass an exam of oral English competency. This exam is designed to demonstrate that an applicant speaks English as proficiently as a typical U.S. native speaker and that the applicant can be easily understood by the average pharmacy customer.

In order to meet the English competency requirement, an applicant may first take a prescreening English competency exam. If the applicant passes the pre-screening exam, the applicant meets the English competency requirement without further testing. If the applicant fails the pre-screening exam, the applicant must take and pass a more comprehensive test of oral English competency. The pre-screening test and the comprehensive test of oral English competency will be given by Board approved vendors. A list of such vendors is attached.

If an applicant believes that he/she will be unable to pass either the pre-screening or more comprehensive test of oral English competency, or if the applicant has failed the comprehensive test of oral English competency, because of a speech impairment, the applicant may submit evidence of such an impairment to the Board. To do so, the applicant must submit documentation of the impairment on a form provided by the Board. The form must be completed by a Board approved licensed physician and a Board approved licensed speech-language pathologist, and returned to the Board. This must be done either with the initial application or **before** the applicant s second attempt at passing the comprehensive test.

If an applicant fails the comprehensive test more than one time, the applicant may not submit documentation of a speech impairment unless an intervening surgical/medical event has caused the impairment and the documentation is submitted before a third attempt.

In order to take either the pre-screening test or the comprehensive test of oral English competency, the applicant must contact a Board approved vendor (below).

## ORAL ENGLISH COMPETENCY VENDORS

The Berlitz Language Center Berlitz Language Center Hillary Soloff, PhD

1413 Annapolis Road 1407 York Road, Ste. 312 34 Raisin Tree Circle Odenton, MD 21113 Lutherville, MD 21093 Pikesville, MD

Phone: 410-672-3410 Phone: 410-296-8365 Phone: 410-602-0730

#### (Centers Nationwide)

#### **SCORES**

In order to qualify for a license, candidates must obtain a passing grade of 75 on each of the first three examinations (that is, a score of 75 on the NAPLEX; a score of 75 on the MPJE; a score of 75 on the Laboratory Test). The passing score for the oral English competency portion of the examination will be determined by the Board approved vendor. Applicants will receive notification of scores in the mail and on the Board web site. Scores will not be released by telephone - (Please Read Enclosure Release of Scores ). All requirements, including FPGEE certificates for foreign school graduates, must be met before the release of laboratory scores. When a candidate passes the examinations, he/she is sent a computer generated license. An optional wall certificate with calligraphy printing can be purchased at an additional charge from the Board approved vendor.

## PREVIOUS FAILURE ON AN EXAMINATION

If a candidate has previously failed either the NAPLEX or MPJE, he/she must complete a new application to the Board for approval to take a subsequent examination. Any portion of the exam grades are only good for one year from examination date. The Board must approve the application before it is submitted to NABP. If a candidate has previously failed the Laboratory Test, he/she must submit a letter along with the appropriate fee requesting to take a subsequent examination.

#### **FEES**

#### 1. NAPLEX

\$360 (make certified/cashier check or money order payable to NABP) - DO NOT SEND FEE TO THE MARYLAND BOARD OF PHARMACY -- FORWARD TO NABP.

#### 2. MPJE

\$130 (make certified/cashier check or money order payable to NABP) - DO NOT SEND FEE TO THE MARYLAND BOARD OF PHARMACY.

#### 3. Score Transfers

If you request a score transfer to another State, include an additional \$75.00 for each state. Refer to the NAPLEX/MPJE Candidate guide for information.

# 4. Laboratory Test

\$100 (make check or money order payable to Maryland Board of Pharmacy)

# 5. Pre-Screening Test of Oral English Competency and: Full Test of Oral English Competency

(Contact vendor for fee)

## **APPLICATION SIGNATURES**

Applicants must attest to the fact that all statements made on the licensure application are true. Making a false statement on the application for licensure may be determined as cause for the Board to revoke a license.

### MARYLAND BOARD OF PHARMACY

4201 Patterson Avenue Baltimore, Maryland 21215

## PHARMACY EXPERIENCE AFFIDAVIT

(Please Fill In All Blank Spaces)

State of	; County or City of
	, the undersigned, hereby certify that I am a licensed Pharmacist in the State of
	Certificate No; and that (Supervising Pharmacist)
	, received practical pharmacy experience as follows:  (Applicant s Name)
	HOURS OF EXPERIENCE
From _	to# of Weeks x Hours per Week = Hours Earned
From _	to# of Weeks x Hours per Week = Hours Earned
From _	to# of Weeks x Hours per Week = Hours Earned
From _	to# of Weeks x Hours per Week = Hours Earned
From _	to # of Weeks x Hours per Week = Hours Earned
From _	to # of Weeks x Hours per Week = Hours Earned
From _	to# of Weeks x Hours per Week = Hours Earned
From _	to# of Weeks x Hours per Week = Hours Earned
	TOTAL HOURS reported on the form:
(6)	, do solemnly swear or affirm, under the penalties of
	pervising Pharmacist) that I have personally completed this form to the best of my knowledge and belief, that I
understa	nd that perjury on this form will constitute grounds for revoking any license issued which
uses this	form as a supporting document.
	SIGNATURE:
	PHARMACY:
	ADDRESS:
A.D., 19	

**IMPORTANT NOTICE**: This affidavit must be notarized and submitted with the APPLICATION FOR EXAMINATION AS A PHARMACIST or the APPLICATION FOR REINSTATEMENT EXAMINATION.

Revised 1/2/02